

Connections



FIRST CONNECTIONS – EARLY INTERVENTION IN ARKANSAS

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What Are the DEC Recommended Practices?

The Division for Early Childhood (DEC) of the Council for Exceptional Children developed the DEC Recommended Practices (RPs) to highlight practices specifically known to promote positive outcomes of young children and to support their families in helping their child develop and learn. The DEC RPs provide guidance to practitioners and families about the most effective ways to improve the learning outcomes of young children birth -- 5 who have or are at-risk for developmental delays or disabilities.

The DEC Recommended Practices are based on the best-available empirical evidence as well as the wisdom and experience of the field. The practices are organized into eight topic areas (Leadership + the 7 Practitioner topics: Assessment, Environment, Family, Instruction, Interaction, Teaming and Collaboration, and Transition). Though categorized by topic, they should be viewed holistically across the topic areas. Family Practices, for example, are grouped in one topic area but are fundamental to all of the topic areas.

The DEC Recommended Practices are supported by research, values, and experience. They build on, but not duplicate, standards for typical early childhood settings such as the NAEYC Developmentally Appropriate Practices. The DEC RPs are:

- those with the highest expected leverage and impact on outcomes, providing the “biggest bang”
- practices representing the breadth of the topic area
- observable

- not disability-specific
- delivered in all settings including natural / inclusive environments

The DEC assumes that EI and ECSE professionals who implement the practices:

- Have foundational knowledge of developmentally appropriate early childhood practices.
- Have an understanding of regulatory guidelines for serving children in accordance with IDEA and state statutes.
- Act in accordance with the principles of access and participation described in the DEC/NAEYC (2009) position statement on inclusion to support full inclusion of children with disabilities.
- Engage in ongoing professional development to increase their knowledge, skills, and dispositions for implementing the RPs as intended.

The purpose of the DEC RPs is to bridge the gap between research and practice by providing guidance to practitioners and families about the most effective ways to improve outcomes for young children with disabilities, their families, and the personnel who serve them. The DEC Recommended Practices support children’s access and participation in inclusive settings and natural environments and address cultural, linguistic, and ability diversity.

Goal of Arkansas’ Early Intervention Program under IDEA, Part C:

To increase the percentage of parents who report that early intervention helped them help their child learn and develop.

Supporting Peer Interactions in the Classroom

From: *Disabilities Services Newsletter*. National Center on Early Childhood Development, Teaching and Learning. December 2017 | Issue No. 9

Children learn new skills by watching and interacting with other children during play and everyday activities. Peer interactions promote learning and development in language, literacy, and cognition. They also promote motor and social and emotional development. An article published by the National Center on Early Childhood Development, Teaching and Learning in their *Disabilities Services Newsletter* discusses ways to enhance child-to-child interactions in the classroom and at home.

Read About It

Two and a half year old Jake attends an Early Head Start program. His teachers notice that Jake rarely talks with other children, although he talks with his teachers daily, and his family has shared that he talks with them at home. Jake joins classroom activities, follows directions, and plays well with other children. However, when interacting with peers, he mostly uses gestures, smiles, and actions, such as handing a toy to another child, to communicate. Mr. Dewey, the disabilities coordinator, provided strategies his teachers can use to increase Jake's expressive language during peer interactions:

Using the Division for Early Childhood (DEC) Recommended Practices: Interaction

The DEC Recommended Practices (RPs) on interaction offer practices that early intervention professionals, classroom teachers, disabilities coordinators, and other caregivers can use to improve learning outcomes for children. The RPs support children's interactions across environments, routines, and activities. Jake's teachers can use the practices at <https://divisionearlychildhood.egnyte.com/dl/tgv6GUXhVo> to help Jake use expressive language to communicate with peers. Examples of some interactional practices are:

- Encourage children to start or sustain positive interactions with peers during classroom activities by modeling how to enter and contribute to play with peers. Provide feedback to children in the moment. For example: "Jake, let's ask Sarah and Kyle if you can be a puppy too!"
- Observe a child's verbal or non-verbal communication. Respond by using language to label and expand on the child's requests, needs, preferences, or interests.
- Observe a child's exploration, play, and social activity. Respond intentionally by joining in and expanding on the child's focus, actions, and intent.

Take a Look

Leah Asking a Friend to Play: Planning Session and In the Classroom

Explore the planning and use of intentional peer interactions as a tool for individualized teaching. First, watch two video clips at <http://headstartinclusion.org/individualizing/videos>.

One shows the planning and deliberate thought process that goes into the interaction. The other shows the actual interaction between peers and how the teacher supports it. While you watch the videos, think about how Jake's teachers could embed similar strategies to encourage his interactions with other children.

Try It Out

DEC RP Child-Child Interaction Checklist

The checklist at http://ectacenter.org/~pdfs/decrp/INT-4_Child-Child_Interaction_2017.pdf includes practices to encourage peer interactions. Use it to develop a plan to use the practices with a child in the classroom or use it in a session at home to promote a parent's use of the practices during daily routines at home. Adapt the checklist as a self-evaluation to track how often you used the practices. A disabilities coordinator like Mr. Dewey could share this checklist with Jake's teachers to help them plan and monitor the strategies they use to support Jake's interactions with his peers.

Improve Your Practice

Peer Support

The Head Start in-service training materials suite at <https://eclkc.ohs.acf.hhs.gov/professional-development/article/15-minute-service-suites> offers strategies for using peers to increase the participation of children who need more support. Examples illustrate what the strategies look like in the classroom. Materials include handouts, presentations with presenter notes, and activities that can be used for professional development.

Using Classroom Activities to Support Peer Interaction

The Center on Social and Emotional Foundations for Early Learning provides information, tips, and strategies at <http://csefel.vanderbilt.edu/briefs/wwb5.pdf> to support peer interactions within classroom activities to benefit children with and without disabilities.



Active Parent/Caregiver Involvement is Key

excerpted from "Early Intervention Can Make a Difference: Utilizing Appropriate and Effective Approaches." *Autism Advocate*, 2nd edition (2009). Anne S. Holmes, M.S., CCC, BCBA

The efficacy of active family and other caregiver involvement in early intervention is evident not only in research, but well demonstrated in clinical practice. Active family and caregiver participation in early intervention ensures generalization of skills learned, and maximizes teaching time. Parents and caregivers need to feel empowered that they can make a difference in their child's life through their day-to-day interactions with their child.

"Behavior strategies taught to parents and caregivers need to be user friendly and applicable to family life." -- Anne Holmes, M.S., CCC, BCBA

IDEA natural environment requirements for children with disabilities to receive intervention services within not only their typical learning environments but also within their typical activities makes practical sense because young learners need to have the immediate opportunity to practice a newly learned skill in the environment where they will use the skill. Even for those rare skills that may be taught in isolation, the sooner the child has opportunities to use the skill in the natural environment, the sooner that child "owns" the skill. The best way for EI professionals to facilitate this transfer is to ensure that parents and other caregivers know how to support the child in practicing the skill in the context of their daily activities.

Early intervention really has to have an outcome-based focus because the only real-world way of judging the effectiveness of the EI services with young children is to assess and judge progress towards outcomes. And not just any "outcomes," but functional outcomes that support the child in begin an active participant in the things that caregivers need the child to be able to do.

"Outcomes must be based on skills that are important to the development of the child. . . . Data must indicate meaningful progress, and parents and caregivers need to see positive changes in the day-to-day life of their child for outcomes to be worthy of attention." -- Anne Holmes, M.S., CCC, BCBA

Coaching Parents to Support Peer Interactions

Family members can be supported in using DEC Recommended Practices within home activities. Tools like the DEC Practice Guides for Families make it easier for early intervention professionals to help parents help their child develop and learn, a primary goal of early intervention.

For example, **Practice Guide for Families: Playing with Friends** helps family members support their child's interactions with other children. The one-page guide on the DEC Recommended Practices Topic Area: INTERACTION provides strategies, tips, methods for family members to informally assess if the strategies are working, and a link to a video example.

Get the Family Practice Guide at:
http://ectacenter.org/~pdfs/docrp/PG_Int_PlayingwithFriends_family_print_2017.pdf

Quarterly Newsletter for First Connections' Providers, Service Coordinators, and Administrators to stay current on happenings in early intervention under IDEA, Part C



Practicing Natural Environment Principles

Principle 5 of 7 (below) is excerpted from: **Workgroup on Principles and Practices in Natural Environments**, OSEP TA Community of Practice: Part C Settings. (2008, March). *Seven key principles: Looks like / doesn't look like.* http://www.ectacenter.org/~pdfs/topics/families/Principles_LooksLike_DoesntLookLike3_11_08.pdf

Each of the seven principles in the document lists key concepts underlying the brief statement.

Each principle also includes descriptive statements illustrating what that principle would “look like” in practice. There are also descriptions of what it “doesn’t look like” because often these techniques that do not align with best practices of early intervention are still being used by practitioners.

The Looks Like / Doesn't Look Like statements are simply examples. Many others could

PRINCIPLE 5: IFSP outcomes must be functional and based on children’s and families’ needs and priorities	
Concepts ✓ <i>Functional outcomes improve child participation in meaningful activities</i> ✓ <i>Functional outcomes build on natural motivations to learn and do and fit what’s important to families</i> ✓ <i>Functional outcomes strengthen naturally occurring routines and enhance natural learning opportunities</i> ✓ <i>The family understands that strategies are worth working on because they lead to practical improvements in child & family life</i>	
This principle DOES look like this	This principle DOES NOT look like this
Writing IFSP outcomes based on the families’ concerns, resources, and priorities	Writing IFSP outcomes based on test results
Writing functional outcomes that result in functional support and intervention aimed at advancing children’s engagement, independence, and social relationships.	Writing IFSP outcomes focused on remediating developmental deficits.
Writing integrated outcomes that focus on the child participating in community and family activities	Writing discipline specific outcomes without full consideration of the whole child within the context of the family
Describing what the child or family will be able to do in the context of their typical routines and activities	Listing the services to be provided as an outcome (Johnny will get PT in order to walk)
Writing outcomes and using measures that make sense to families; using supportive documentation to meet funder requirements	Writing outcomes to match funding source requirements, using medical language and measures (percentages, trials) that are difficult for families to understand and measure
Identifying how families will know a functional outcome is achieved by writing measurable criteria that anyone could use to review progress	Measuring a child’s progress by “therapist checklist/observation” or re-administration of initial evaluation measures
Having outcomes that build on a child’s natural motivations to learn and do; match family priorities; strengthen naturally occurring routines; enhance learning opportunities and enjoyment	Having outcomes that focus on deficits and problems to be fixed

